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To: Immunization Program Coordinators
 California Immunization Coalition members
 VFC Providers

October 2014

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Time to Immunize Against Influenza!

Flu season is here! Yearly vaccination is the most important step in protecting people against influenza and its serious complications.

- Pregnant women** are at risk for pre-term delivery, stillbirth, or hospitalization from flu. Still, [fewer than 50% of pregnant women in the U.S. receive an annual flu shot](#). Pregnant women may be more receptive to immunization if they learn about the benefits to their baby. Prenatal flu vaccine is effective in preventing hospitalizations in young [infants](#) and [mothers](#). From 2003-12, an average of 6,514 infants were hospitalized for influenza each year. Most of the infants were initially healthy but, too young to get vaccinated. Prenatal immunization is a good opportunity for the mother and her baby to avoid flu. [Read more](#). See also CDC’s fact sheet [Pregnant Women Need a Flu Shot](#).
- Young children:** [ACIP preferentially recommends LAIV](#) (FluMist®) for children 2-8 years of age. Providers who carry both injectable vaccines and Live Attenuated Influenza Vaccine (LAIV) should consider prioritizing LAIV. Vaccination should not be postponed if LAIV is unavailable. A [recent study](#) showed that immunization reduced flu-related pediatric intensive care unit admissions by 74% from 2010-12.



- **Adults:** Flu vaccination was associated with a [71% reduction in flu-related hospitalizations](#) among adults during the 2011-2012 flu season. High-dose influenza vaccine for persons 65 years and older [reduces influenza cases by 24%](#) compared with standard flu vaccine.
- **Health care personnel (HCP):** Data published in the September 19 *MMRW* indicate that [84% of California hospital employees and 62% of independent practitioners were vaccinated](#) against flu during the 2013-14 influenza season. HCP are at increased risk of coming into contact with flu. Promote [HCP flu vaccination](#) to protect staff and patients.

This year's flu vaccines contain the same strains as last year's vaccine. For helpful resources, refer to the [Immunization Branch's flu materials](#), including the [2014-15 flu vial chart](#) (pictured on page 1). Order copies of most materials from your [local health department](#).

Epi Data/Outbreaks



California Pertussis Update

Pertussis cases in California continued to climb over the summer, though the most recent numbers may indicate a slowing. As of September 15, 8,278 cases of pertussis had been reported in California in 2014, with the most severe impact still seen in infants under 6 months old. See the [Immunization Branch's pertussis prevention materials](#) and latest [California pertussis reports](#) online.

Emerging Infectious Diseases

Ebola Virus Report

As of September 29, there have been over 6,500 Ebola Virus Disease (EVD) cases and over 3,000 deaths in West Africa, and officials fear the end of this large scale outbreak is not yet in sight. While EVD is not yet vaccine-preventable, in September, technical experts convened at WHO to discuss ways to fast-track procedures for testing new vaccines and therapies. The National Institutes of Health (NIH) is currently working with vaccine manufacturer GlaxoSmithKline (GSK) to develop a new genetically engineered vaccine with a goal of having 10,000 doses by the end of the year.

A second new Ebola vaccine, developed by the Public Health Agency of Canada and now being engineered by NewLink Genetics, began clinical trials in September. To date, both vaccines have protected monkeys and some other lab animals against Ebola virus in the lab.

No cases of Ebola have been reported in California. Nonetheless, with heightened attention around the globe to mitigate the spread of EVD, CDPH has created a new [Ebola virus poster](#). For more information on Ebola and precautions, see the [CDC's guidance on Ebola virus for health care settings](#).



MERS: CDC Interim Guidance for Health Professionals

CDPH continues to keep abreast of Middle East Respiratory Syndrome (MERS) and has a new [MERS webpage](#). CDC's most recent [MERS Guidance](#) is now available. Providers may wish to know more about [definitions for patients under investigation](#) and close contacts.

Statewide Immunization Campaigns

Shot by Shot: New Stories

The California Immunization Coalition's Shot by Shot project has several new sources for stories, including the SBS Facebook community, the Los Angeles Department of Public Health, the Texas Children's Hospital, and the *Vaccine Knowledge Project*, a British nonprofit which is generously sharing their videos.

Use Wendy's story in your seasonal flu messaging. Infant pertussis stories like baby Marco's continue to captivate attention on social media, increasing awareness of the need for prenatal Tetanus, Diphtheria, and acellular Pertussis (Tdap) vaccination. Share these stories or "Like" ShotbyShot.org on Facebook to help stories circulate.

- [Facing Influenza](#) (3 families' flu stories)
- [Wendy's Story](#) (influenza)
- [Marco's story](#) (pertussis – written)
- [Lauren's story](#) (pertussis)
- [Sarah C's Story](#) (measles)
- [Sarah W's Story](#) (measles – SSPE)
- [Charlotte's Story](#) (pneumococcal meningitis)
- [Sam's story](#) (meningococcal meningitis)
- [Ian C's story](#) (rubella - CRS)



Vaccine News

ACIP Recommends Pneumococcal Conjugate Vaccine (PCV13) for Adults 65 Years and Older

[ACIP now recommends pneumococcal conjugate vaccine \(PCV13; trade name Prevnar 13\)](#) as well as pneumococcal polysaccharide vaccine (PPSV23; trade name Pneumovax) for all adults aged ≥ 65 years ([box](#)). Those who have not previously received pneumococcal vaccine or whose vaccination history is unknown should receive a dose of PCV13 first, followed at least 6 months later by a dose of PPSV23. The two vaccines should not be co-administered. The minimum acceptable interval between PCV13 and PPSV23 is 8 weeks.

Previous vaccination with PPSV23. Adults aged ≥ 65 years who have previously received ≥ 1 dose of PPSV23 and who have not yet received PCV13 should receive a dose of PCV13 at least 1 year after receipt of their most recent PPSV23 dose. When an additional dose of PPSV23 is indicated, it should be given 6 -12 months after PCV13 and ≥ 5 years after the most recent dose of PPSV23.

ACIP recommendations remain unchanged for the routine use of PCV13 in adults aged ≥ 19 years with any of the following:

- immunocompromising conditions
- functional or anatomic asplenia
- cerebrospinal fluid leak
- cochlear implants.

See also the CDC's new fact sheet [Pneumococcal Vaccines \(PCV13 and PPSV23\)](#).

- **Long-Term Study of Quadrivalent HPV Vaccine**
Quadrivalent Human Papillomavirus (HPV) vaccine sustains antibody titers in adolescents for at least 8 years. [Read more](#)
- **Effectiveness of Maternal Pertussis Vaccination in England**
Pertussis hospitalizations in young infants in the UK decreased between 2012 and 2013 after more mothers had received prenatal vaccine similar to Tdap. Prenatal immunization was 90% effective for infants 2 months or younger. [Read more](#).
- **Missed Opportunities to Vaccinate with HPV: A Qualitative Study**
Higher vaccination rates resulted when HPV vaccine was emphasized as preventing cancers rather than sexually-transmitted infections. [Read more](#).

CAIR News

CAIR Experiences Growth Spurt

The California Immunization Registry (CAIR) is growing rapidly from data supplied by Northern and Southern California Kaiser Permanente since June 2014. The total number of vaccine doses in CAIR is now up to a record high of about 167 million as of August. Previously, CAIR's annual rate of increase was about 16 million new doses a year. This is expected to rise nearly 40% to 22 million yearly with the new Kaiser data, and is likely to climb even higher, driven by new practices joining CAIR due to the [federal electronic health record incentive program](#). Since August 2013, over 3,700 California provider sites have registered at CAIR's Immunization Data Portal, with many already in production to test their readiness for data exchange.



Provider Education

CDPH Webinar on Improving Tdap in Prenatal Practice

The Immunization Branch's webinar, "*Increasing Tdap Immunization Rates and Running an Efficient Immunization Practice: Tips from California OBs*" is available for [on-demand](#) viewing anytime at the [eziz.org](#) homepage under "hot tips." The 1-hour program provides 1 unit of CME or CEU. Speakers include practicing obstetricians sharing strategies on building a successful prenatal Tdap program.

New Tools to Help with HPV Conversation

HPV vaccination continues to lag behind the other adolescent vaccines. Missed opportunities abound, and a strong provider recommendation can be a key factor in a parent deciding to accept the vaccination. New tools for clinicians include 1) a series of video mock encounters [Just Another Shot: Reframing the HPV Vaccine](#), produced by the Minnesota Department of Health. 2) A free online CME video produced by Medscape, [HPV in our Midst: Understanding the Problem and Having a Conversation](#), featuring physician Ina Park from the CDPH STD Control Branch discussing "The HPV Vaccination Conversation" with a colleague.



IZ Branch Wins Silver and Bronze Awards!

The CDPH Immunization Branch received two awards from the National Public Health Information Coalition (NPHIC) for its [HPV immunization appointment reminder cards](#) (silver award, specialty print project) and “[Vaccines for Teens and Preteens](#)” (bronze award, in-house brochure). These two items are available for *Preteen Vaccine Week* and throughout the year.



Adult Immunization Skills-Testing for Clinicians

Looking to assess your skills and knowledge? Medscape created these two challenges. Good luck!

- [Have These Patients Been Immunized Appropriately? A Case-Based Challenge](#)
- [Test Yourself: What Adult Needs What Vaccine?](#)

Immunization Branch Pilot Study on Prenatal Prescription Pad

In August, the Immunization Branch distributed an information packet to all prenatal care providers in California. The Branch is conducting a pilot evaluation of a Tdap prescription pad (pictured here) for obstetricians who refer patients to pharmacies, health departments, or primary care providers for prenatal Tdap or influenza immunizations. The small study will evaluate the impact of the prescription/reminder on prenatal immunization rates. To learn more about the project, contact Jane.Pezua@cdph.ca.gov

Assessments

Child Care, Kindergarten, and 7th Grade Immunization Fall Assessments

The deadline to submit reports for Child care and kindergartens is **October 15** and for 7th Grade is **November 1, 2014**.



Informational materials were emailed to Immunization Coordinators and Branch Field Representatives in August and to schools by early September.

The following tips may help with online reporting at www.ShotsForSchool.org/reporting:

- **The password** for kindergarten and 7th grade sites was sent in recent the *Memo to Schools* - find it on the login pages under “Reporting Tools.”
- **NEW! Facilities and Schools may revise** their submitted reports by logging in and selecting “Revise Submitted Report.” There is no longer a need to contact local health department staff for this function.
- **Submitters without Internet access** can request a paper form from their respective counties.

- **If a school/facility cannot locate its name on the online list**, the school was either not on the active Department of Education (CDE) school list—or Department of Social Services (DSS) for child care facility—or has fewer than 6 students. Unlisted schools/facilities with at least 6 students should contact CDE/DSS to update their status. Those unlisted are *not* expected to report online this year but are welcome to submit a paper form.

More information is at ShotsForSchool.org/reporting, or contact Teresa.Lee2@cdph.ca.gov.

Branch Staff Updates

Jason Narine is the Branch’s new Web Developer, supporting an online training project for local health departments and the Branch’s technology team. Jason has a BS in Computer Science from the University of San Francisco and experience in website and software development.

Troy Parrish is our new Instructional Designer designing eLearning courses and other training materials to support EZIZ and the VFC Program. Troy previously supported the e-commerce website at Dhyanyoga Centers in Antioch. He has a BA from the University of Virginia.

Upcoming Events, Conferences, and Observances

Date	Event	Partners/ Sponsors
October 7-9 (Denver, CO)	IIS and Public Health Conference	American Immunization Registry Association
November 14-19 New Orleans, LA)	American Public Health Assn Annual Conference	American Public Health Association
December 7-13	National Influenza Vaccination Week	CDC
January 2015	National Cervical Health Awareness Month	National Cervical Cancer Coalition

New Online Resources

New Materials/Online Resources	Type of resource
2014 Flu Vial Chart IMM-859 (CDPH)	Color chart with images
Pregnant Women Need a Flu Shot (CDC)	Fact sheet
2014 NFID Influenza/Pneumococcal News Conference proceedings	Media release
Pneumococcal Vaccines (PCV13 and PPSV23) (CDC)	Fact sheet
What Vaccines Do You Need? Adult and Adolescent Vaccine Quiz (CDC)	Online quiz
Just Another Shot: Reframing the HPV Vaccine (Minnesota Dept. of Public Health)	Training video
Vaccines for the Entire Family (Nat’l Fnd of Infectious Diseases)	Video
The Vaccine Schedule video featuring AAP spokesperson Ari Brown, MD (AAP)	Video
New CDC Hep B Campaign for Pacific Islanders	Campaign kit
Action Plan for Prevention, Care, and Treatment of Viral Hepatitis (US DHHS)	Action plan
Webinars/Online Training	Archived Webinars from
Increasing Tdap Immunization Rates: Tips from California OBs	CDPH
Current Issues in Immunization	CDC
Management and Prevention of Pediatric Influenza in Healthcare Settings	CDC
Immunization Business and Clinical Strategies for OBGYN Practices	ACOG
IIS Training Evaluation Best Practices: Two State Models	AIRA
HPV in our Midst: Understanding the Problem and Having the Conversation	Medscape